

FILED

7/18/02

UNITED STATES DISTRICT COURT FOR THE
NORTHERN DISTRICT OF ILLINOIS

DEC 13 2007

MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURTIN FORMA PAUPERIS APPLICATION
AND
FINANCIAL AFFIDAVITSolache Edgar P.

Plaintiff

v.
Grupo Antolin +
UAW
Defendant(s)

07 C 50239

CASE NUMBER

JUDGE Kapila

Wherever is included, please place an X into whichever box applies. Wherever the answer to any question requires more information than the space that is provided, attach one or more pages that refer to each such question number and provide the additional information. Please PRINT:

I, Edgar Solache, declare that I am the plaintiff petitioner movant (other _____) in the above-entitled case. This affidavit constitutes my application to proceed without full prepayment of fees, or in support of my motion for appointment of counsel, or both. I also declare that I am unable to pay the costs of these proceedings, and that I am entitled to the relief sought in the complaint/petition/motion/appeal. In support of this petition/application/motion/appeal, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? Yes No (If "No," go to Question 2)
I.D. # _____ Name of prison or jail: _____
Do you receive any payment from the institution? Yes No Monthly amount: _____
2. Are you currently employed? Yes No
Monthly salary or wages: _____
Name and address of employer: _____
 - a. If the answer is "No":
Date of last employment: Nov-29-2007
Monthly salary or wages: \$10.00 per hour
Name and address of last employer: Grupo Antolin - 642 Crystal
Pkwy Belvidere, IL 61008
 - b. Are you married? Yes No
Spouse's monthly salary or wages: _____
Name and address of employer: _____
3. Apart from your income stated above in response to Question 2, in the past twelve months have you or anyone else living at the same address received more than \$200 from any of the following sources? Mark an X in either "Yes" or "No", and then check all boxes that apply in each category.
 - a. Salary or wages
Amount: \$8.50 per hour Received by Thalia Rumbos Yes No

b.	<input type="checkbox"/> Business, <input type="checkbox"/> profession or <input type="checkbox"/> other self-employment	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	Amount _____ Received by _____		
c.	<input type="checkbox"/> Rent payments, <input type="checkbox"/> interest or <input type="checkbox"/> dividends	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	Amount _____ Received by _____		
d.	<input type="checkbox"/> Pensions, <input type="checkbox"/> social security, <input type="checkbox"/> annuities, <input type="checkbox"/> life insurance, <input type="checkbox"/> disability, <input type="checkbox"/> workers' compensation, <input checked="" type="checkbox"/> unemployment, <input type="checkbox"/> welfare, <input type="checkbox"/> alimony or maintenance or <input type="checkbox"/> child support	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Amount <u>\$ 525.00</u> Received by <u>Illinois Department of Employment Sec</u>		
e.	<input type="checkbox"/> Gifts or <input type="checkbox"/> inheritances	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	Amount _____ Received by _____		
f.	<input type="checkbox"/> Any other sources (state source: _____)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	Amount _____ Received by _____		

4. Do you or anyone else living at the same address have more than \$200 in cash or checking or savings accounts? Yes No Total amount: 203.80
In whose name held: Edgar Solache Relationship to you: _____

5. Do you or anyone else living at the same address own any stocks, bonds, securities or other financial instruments? Yes No
Property: _____ Current Value: _____
In whose name held: _____ Relationship to you: _____

6. Do you or anyone else living at the same address own any real estate (houses, apartments, condominiums, cooperatives, two-flats, three-flats, etc.)? Yes No
Address of property: _____
Type of property: _____ Current value: _____
In whose name held: _____ Relationship to you: _____
Amount of monthly mortgage or loan payments: _____
Name of person making payments: _____

7. Do you or anyone else living at the same address own any automobiles, boats, trailers, mobile homes or other items of personal property with a current market value of more than \$1000? Yes No
Property: 97 Volkswagen Jetta
Current value: \$3000
In whose name held: Edgar Solache Relationship to you: myself

8. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute monthly to their support. If none, check here No dependents
Brian Solache - Son - Brenda Solache - Daughter - Alex
Solache - Son - Cindy Solache - Daughter

I declare under penalty of perjury that the above information is true and correct. I understand that pursuant to 28 U.S.C. § 1915(e)(2)(A), the court shall dismiss this case at any time if the court determines that my allegation of poverty is untrue.

Date: Dec 13 2007

Edgar Solache
Signature of Applicant

Edgar P. Solache
(Print Name)

NOTICE TO PRISONERS: A prisoner must also attach a statement certified by the appropriate institutional officer or officers showing all receipts, expenditures and balances during the last six months in the prisoner's prison or jail trust fund accounts. Because the law requires information as to such accounts covering a full six months before you have filed your lawsuit, you must attach a sheet covering transactions in your own account--prepared by each institution where you have been in custody during that six-month period--and you must also have the Certificate below completed by an authorized officer at each institution.

CERTIFICATE
(Incarcerated applicants only)
(To be completed by the institution of incarceration)

I certify that the applicant named herein, _____, LD.# _____, has the sum of \$ _____ on account to his/her credit at (name of institution) _____. I further certify that the applicant has the following securities to his/her credit: _____. I further certify that during the past six months the applicant's average monthly deposit was \$ _____.
(Add all deposits from all sources and then divide by number of months).

SIGNATURE OF AUTHORIZED OFFICER

(Print name)

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Account Info**Transfer Funds****Pay Bills****Customer Support****View Account Activity****Show Activity For:**Checking ...9147 [Print This Page](#)[View Search Options](#)**Account:** Checking ...9147**Current Balance:** \$203.80**Available Balance:** \$203.80 *

*Includes amounts available through overdraft protection, if applicable.

= Check Image

Date	Description	Type	Debit(-)	Credit(+)	Running Balance
Pending Items					
12/12/2007	VISA CHECKCARD DB-POINT OF SALE	Debit	\$1.03		\$203.80
12/12/2007	PENDING CHECK(S)-ITEM PROCESSING	Check 734690002	\$33.43		\$204.83
12/12/2007	ATM CASH WITHDRAWAL	Debit	\$60.00		\$238.26
Posted Items					
12/07/2007	SULLIVAN FOODS, BELVEDERE,IL POINT OF SALE PURCHASE	Debit	\$14.93		\$298.26
12/07/2007	GRUPO ANTOLIN IL PAYROLL 071205	Credit		\$223.98	\$313.19
12/06/2007	FAMILY COUNSELING SERVICE, ROCKF NC CHECKCARD TRANS.	Debit	\$18.00		\$298.26
12/06/2007	CAPITAL ONE ONLINE PMT 733938910195732	Debit	\$25.00		\$289.21
12/03/2007	NAT CITY ATM CASH WITHDRAWAL 1004 N. STATE ST., BELVIDERE,IL	Debit	\$20.00		\$289.21
11/30/2007	AMOCO OIL 08616104, BELVIDER NC CHECKCARD TRANS.	Debit	\$3.99		\$285.21
11/30/2007	STOP N GO #291, BELVIDERE,IL POINT OF SALE PURCHASE	Debit	\$13.46		\$285.21
11/30/2007	SUPER MERCADO GUANAJUATIT, BELVI NC CHECKCARD TRANS.	Debit	\$17.69		\$289.21
11/29/2007	WAL-MART #3597, BELVIDERE,IL POINT OF SALE PURCHASE	Debit	\$11.06		\$287.35
11/27/2007	STOP N GO #291, BELVIDERE,IL POINT OF SALE PURCHASE	Debit	\$18.20		\$287.35
11/27/2007	NAT CITY ATM CASH WITHDRAWAL 1004 N. STATE ST., BELVIDERE,IL	Debit	\$20.00		\$287.35
11/26/2007	AMOCO OIL 08616104, BELVIDER NC CHECKCARD TRANS.	Debit	\$3.99		\$283.61
11/26/2007	AUTOZONE 2649, BELVIDERE,IL POINT OF SALE PURCHASE	Debit	\$4.26		\$283.61
11/23/2007	GRUPO ANTOLIN IL PAYROLL 071120	Credit		\$276.82	\$244.86
11/21/2007	AMOCO OIL 08616104, BELVIDER NC CHECKCARD TRANS.	Debit	\$5.38		\$239.48
11/21/2007	SUBWAY #2867, BELVIDERE, IL NC CHECKCARD TRANS.	Debit	\$16.87		\$239.48
11/21/2007	CHECK	Check 239	\$18.00		\$221.61
11/21/2007	OVERDRAFT CHARGE	Debit	\$30.00		\$191.61
11/21/2007	WAL-MART #3597, BELVIDERE,IL POINT OF SALE PURCHASE	Debit	\$104.78		\$86.83
11/21/2007	CHECK	Check 240	\$300.00		\$143.07
11/20/2007	ROAD RANGER #207, BELVIDERE, IL NC CHECKCARD TRANS.	Debit	\$5.92		\$143.07
11/20/2007	OLD CHICAGO 40, ROCKFORD, IL NC CHECKCARD TRANS.	Debit	\$22.48		\$143.07
11/20/2007	OLD CHICAGO 40, ROCKFORD, IL NC CHECKCARD TRANS.	Debit	\$35.48		\$143.07